

Maryland Health Benefit Exchange

Contract No. DHMS296492

Environmental Analysis and Market Scan- Empirical Research and Attitudinal Research Sections

Produced by: KRC Research

October 2011

Today's Presentation

Task and Methodology

Empirical Data Scan

Research Data Scan Findings and Implications for Marketing

Task: Conduct Environmental Scan and Market Analysis

- Identify, segment and prioritize audiences in Maryland for the advertising and public relations campaign.
- Review existing research, including publicly sponsored and academic research along with syndicated research, to assess if there are significant information gaps that should be addressed.

Purpose of Environmental Scan and Market Analysis

Inform/Educate Collect and Identify Strategize organize Statewide Population Ideal target Most important audiences for population dynamics, next steps statistics prevailing attitudes marketing the • Implications for exchange marketing program • The most current. • Demographic and relevant attitudinal data attitudinal facts that can/should shape messaging • Gaps in current population statistics relevant to health care

Methodology

- KRC Research conducted a review of demographic information for the state of Maryland and publicly available opinion research on:
 - Attitudes toward and opinions on current healthcare and healthcare reform, and
 - Concerns about current and future healthcare.
- The goal of research was to understand the impact of demographics, psychographics and attitudes on exchange positioning.
- Research was gathered between October 5 and October 14, 2011.
- Given the expansive nature of healthcare as a research topic, the scan prioritized:
 - Recently conducted research and available data
 - Research conducted or produced by known reliable sources (prominent institutions in health care research)
 - Research most germane to the topics surrounding the new health reform laws
- Sources that could not be verified, or information that was derived from flawed measurements, and research that appeared to be outdated was not included in the scan.

Methodology

Resources scanned include:

- American Community Survey (of the US Census)
- Bloomberg, LP
- CBS/NY Times Poll
- Deloitte, LP
- Gallup, Inc.
- Harris Interactive
- Henry J. Kaiser Family Foundation
- Mathematica Policy Research
- National Academy of Social Insurance
- RAND Corporation
- Robert Wood Johnson Foundation
- State of Maryland, Department of Planning
- State of Maryland, Health Care Commission Health Insurance Coverage Report
- United Health Foundation
- U.S. Bureau of Labor Statistics
- U.S. Census Bureau
- U.S. Center for Disease Control
- U.S. Department for Health and Human Services, Agency for Health Care Research and Quality
- The Urban Institute

Cautions and Limitations

- This environmental scan and market analysis is built solely off of secondary research, as it is available to the general public.
- This environmental scan and market analysis is of multiple sources (though effort was taken to be as consistent as possible in relying upon a source).
 - Sources are indicated throughout the report, and emphasized when data supporting findings is derived from two different sources
 - At times, sources may differ on a statistic. Citations are made when these differences occur.
- Most of the contents of the research study scan are of national studies, and therefore, findings cannot be inferred to Maryland residents. These are included because understanding national sentiment can improve the structure of primary research of Maryland residents.
- Demographic analysis of some sources is based upon the most recent data, which is from 2009, however, the report presenting the findings was generated in 2011. This appeared to be the most current source of data in many cases.

Task and Methodology

Empirical Data Scan

Research Data Scan Findings and Implications for Marketing

Empirical Data Scan

Basic Demographics

Income and Poverty Statistics

Employment Statistics

Insurance Statistics

Uninsured Statistics

Document demographic statistics surrounding the Maryland population, employment, and insurance status in one place, for reference throughout the tenure of marketing activities

Synthesize various demographic statistics as a foundation in identifying ideal target audiences

Educate readers of this scan as to the population dynamics related to this topic

Identify any gaps in necessary demographic information

10

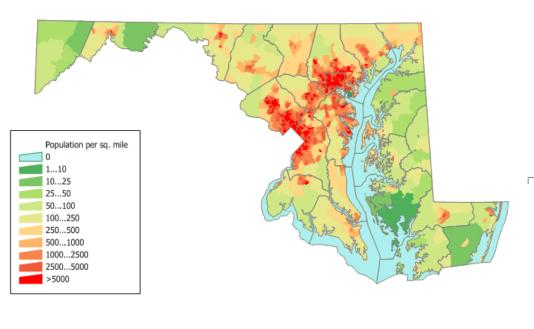
Non-Citizen

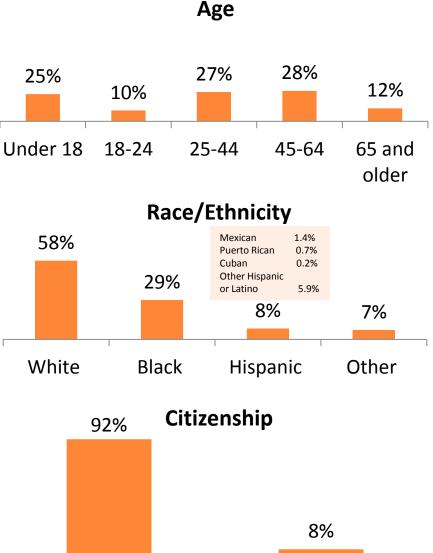
State Demographics

Population: 5,773,552

(48% male, 52% female)

Maryland Population Map





Citizen



State Demographics: Households

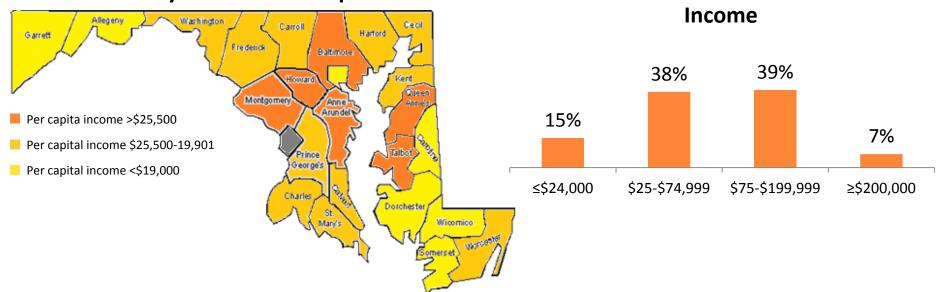
Households by Type	Percent
Married-Couple Family	49%
(With own children under 18 years)	22%
Male Householder Family, No wife	4%
(with own children under 18 years)	2%
Female Householder Family, No husband	14%
(with own children under 18 years)	8%
Non-Family Households	33%
(Householder living alone)	27%
(65 years and over)	9%

State Income Statistics

Population: 5,773,552

Mean or Median Income: \$65,183

Maryland Income Map





State Poverty Statistics

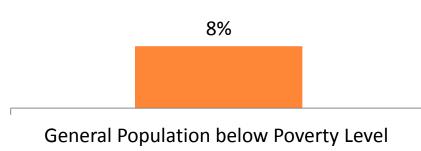
Population: 5,773,552

Mean or Median Income: \$65,183

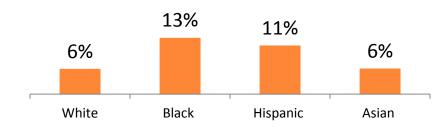
2010 Poverty Guidelines for the 48 Contiguous States and the District of Columbia

Persons in family	Poverty guideline	
1	\$10,830	
2	14,570	
3	18,310	
4	22,050	
5	25,790	
6	29,530	
7	33,270	
8	37,010	
For families with more than 8 persons, add \$3,740 for each additional person.		

Poverty Level

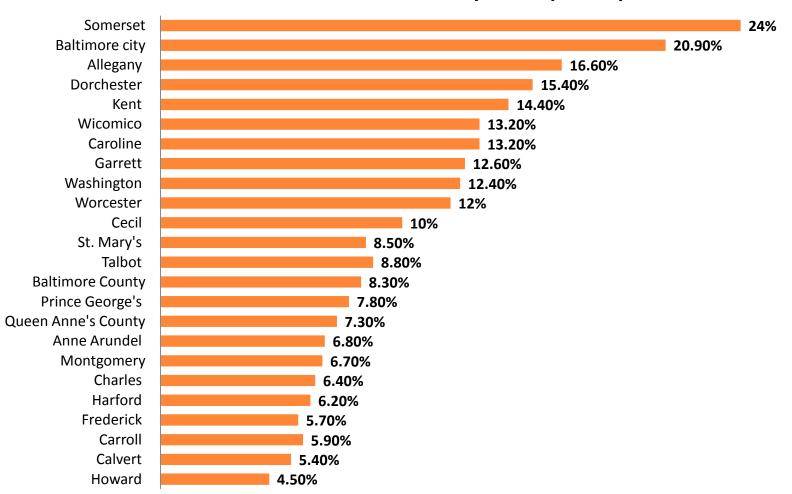


Poverty Level by Race



State Poverty Statistics

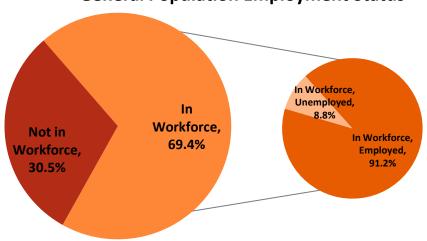
Persons Below Poverty Level by County



Population: 5,773,552

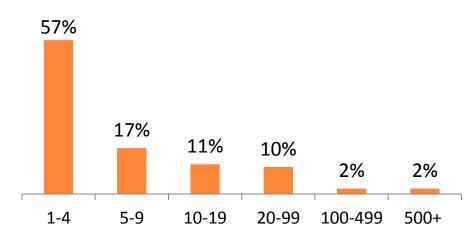
Mean or Median Income: \$65,183

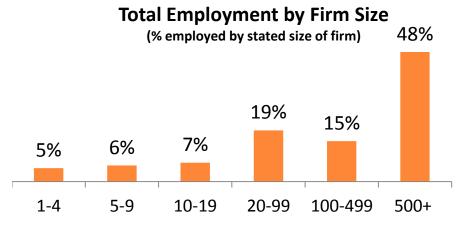
General Population Employment Status



Firm Size per Number of Employees

(% of firms with stated number of employees in the workforce)

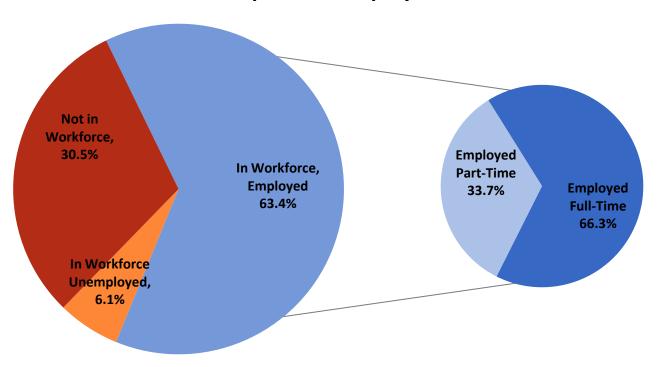




Population: 5,773,552

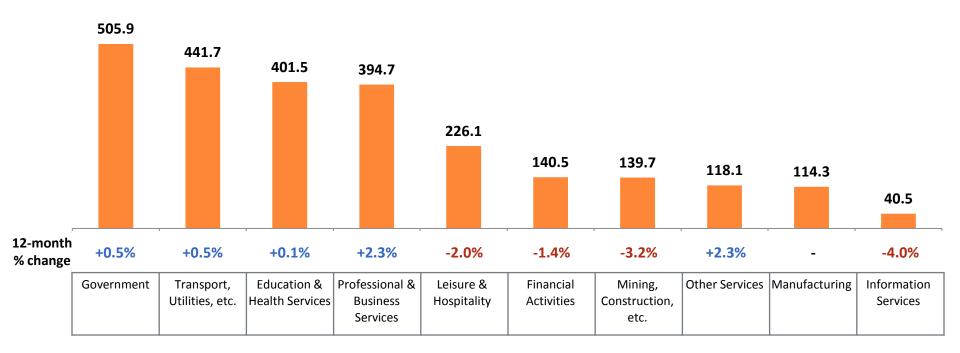
Mean or Median Income: \$65,183

General Population Employment Status



Jobs by Industry: August 2011

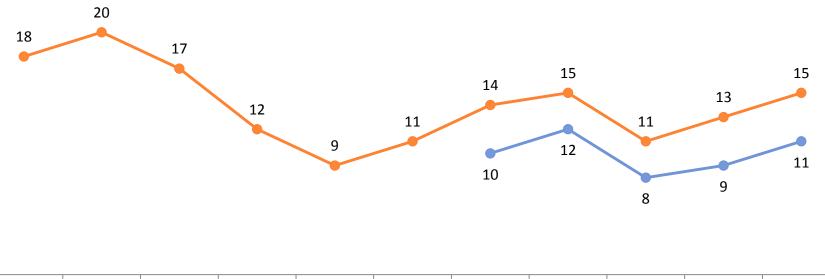
Number of jobs, in thousands, seasonally adjusted.



State Un/Under Employment Ranking

Maryland's Ranking: 2000-2010

(Numbers shown below represent rank among other states)





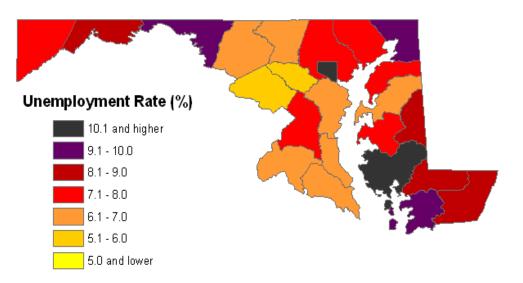
Source: United Health Foundation, America's Health Rankings (2010)

Population: 5,773,552

Mean or Median Income: \$65,183

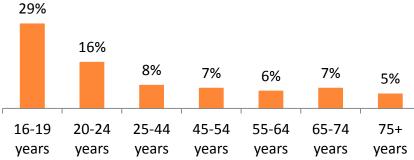
Maryland Unemployment Map

(Unemployment: Aug. 2011 - 7.3%)



Unemployment Rate by Age

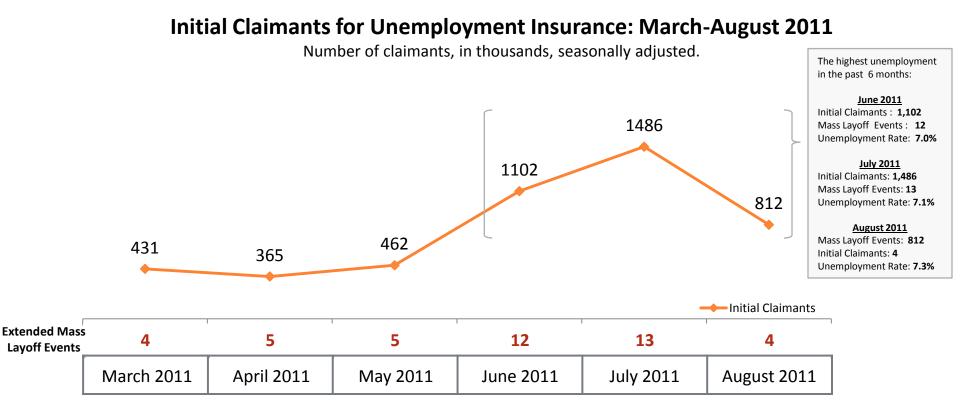
Average Unemployment Rate: 8.8%



Work Status of Family Households	
No workers in past 12 months	11%
1 worker in past 12 months	40%
2 or more workers in past 12 months	58%
Percent Imputed	
Food stamp/SNAP recipients	1%



State Unemployment Data



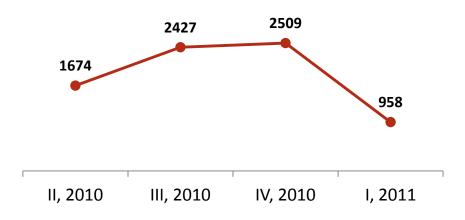
Source: U.S. Bureau of Labor Statistics, Economy At a Glance: Maryland (August 2011)

Note: An *initial claimant* constitutes a person who files any notice of unemployment to initiate a request either for a determination of entitlement to and eligibility for compensation, or for a subsequent period of unemployment within a benefit year or period of eligibility. An *extended mass layoff event* constitutes a layoff defined by the filing of 50 or more initial claims for unemployment insurance benefits from an employer during a 5-week period, with at least 50 workers separated for more than 30 days. Such layoffs involve both persons subject to recall and those who are terminated.

Unemployment Data: Demographic Distribution

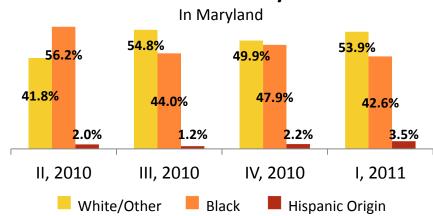
Maryland Initial Claimants for Unemployment Insurance

By Quarter



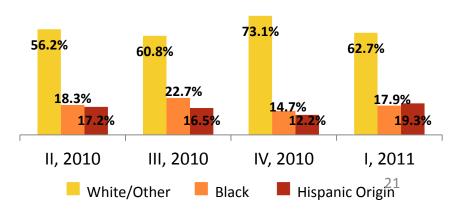
Source: U.S. Bureau of Labor Statistics, Extended Mass Layoffs Quarterly News Releases (2010-2011) **Note:** Unemployment statistics for claimants encompasses data from the private nonfarm sector. An *initial claimant* constitutes a person who files any notice of unemployment to initiate a request either for a determination of entitlement to and eligibility for compensation, or for a subsequent period of unemployment within a benefit year or period of eligibility.

Initial Claimants by Race



Initial Claimants by Race

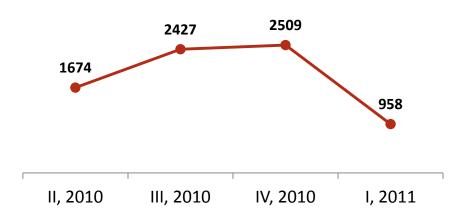
Total U.S.



Unemployment Data: Demographic Distribution

Maryland Initial Claimants for Unemployment Insurance

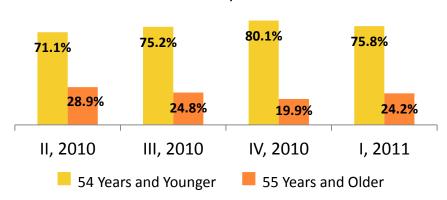
By Quarter



Source: U.S. Bureau of Labor Statistics, Extended Mass Layoffs Quarterly News Releases (2010-2011) **Note:** Unemployment statistics for claimants encompasses data from the private nonfarm sector. An *initial claimant* constitutes a person who files any notice of unemployment to initiate a request either for a determination of entitlement to and eligibility for compensation, or for a subsequent period of unemployment within a benefit year or period of eligibility.

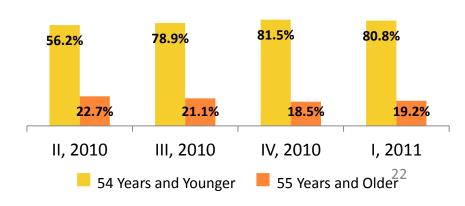
Initial Claimants by Age

In Maryland

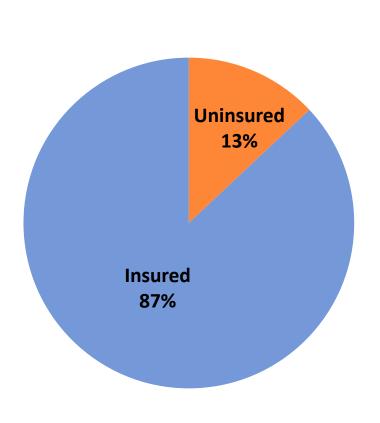


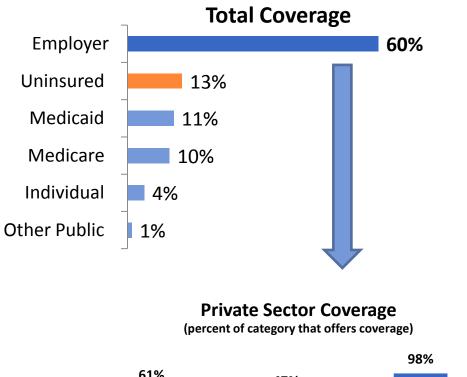
Initial Claimants by Age

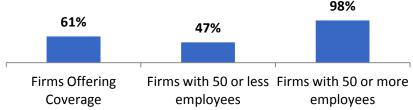
Total U.S.



State Insurance Statistics (2009)



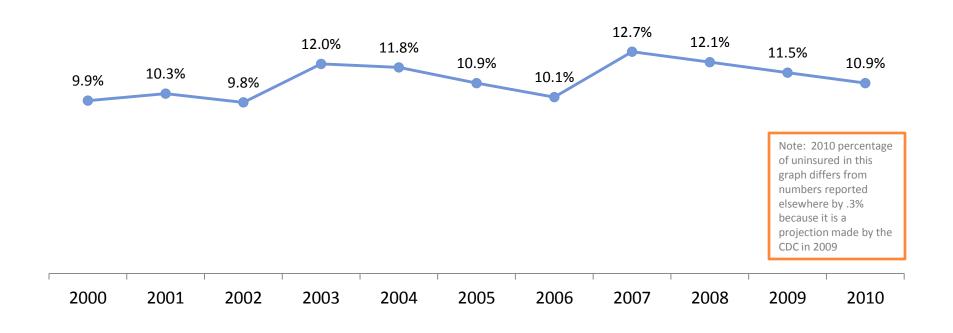




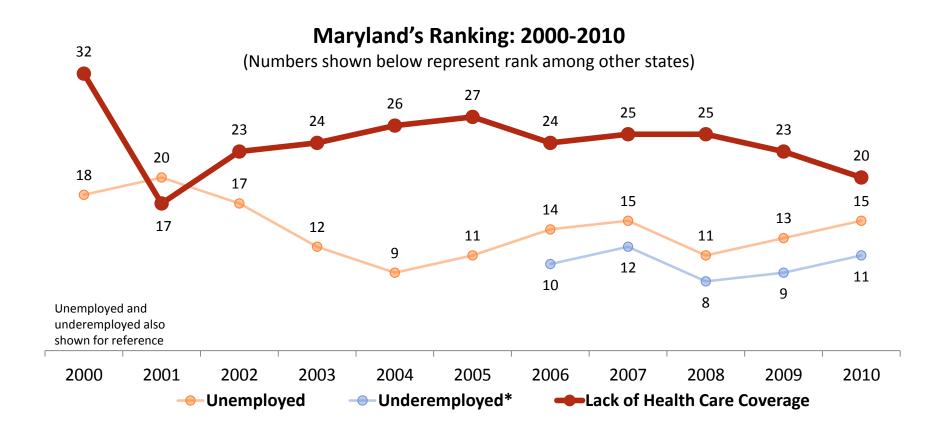


Uninsured in Maryland: 2000-2010

% Without Any Type of Health Care Coverage



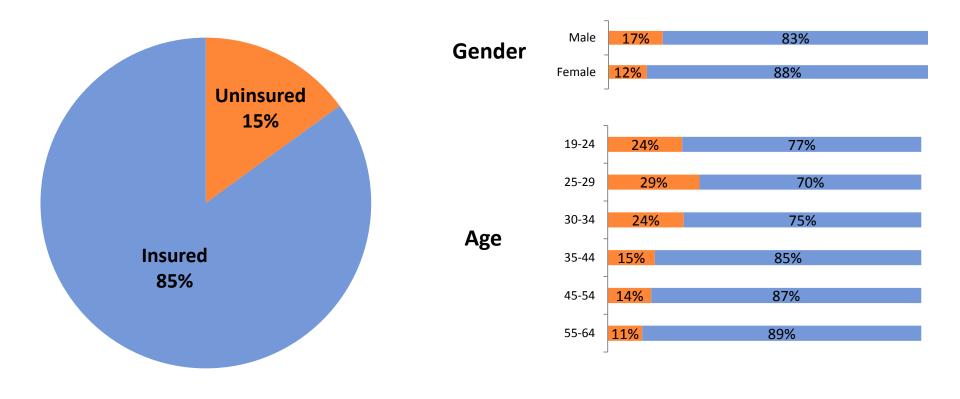
State Health Care Coverage Statistics



Source: United Health Foundation, America's Health Rankings (2010)

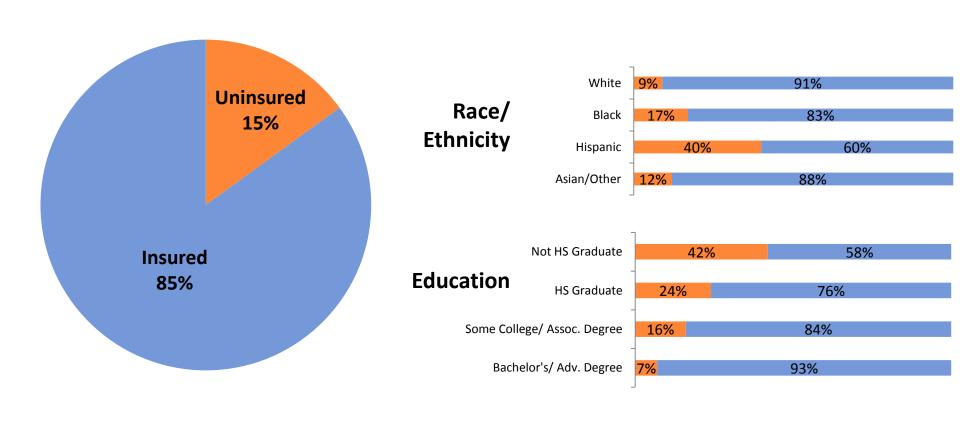
State Uninsured vs. Insured Demographics

(nonelderly)



State Uninsured vs. Insured Demographics

(nonelderly)



Task and Methodology

Empirical Data Scan

Research Data Scan Findings and Implications for Marketing

Research Study Scan

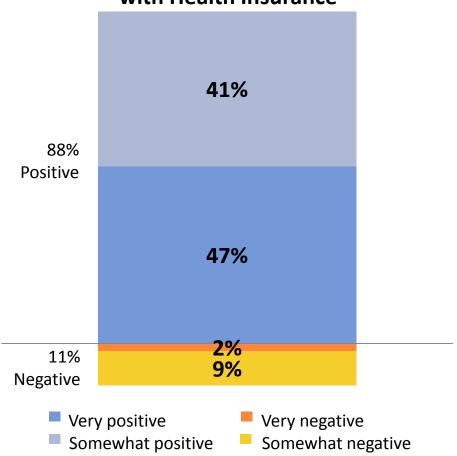
Public Opinion Research

Academic Research Studies

- Document public opinion attitudes toward health care and health reform law in the United States
- Synthesize various national statistics as a foundation for learning about the current mindset on the topic
- Educate readers of this scan as to the general population (nationwide) dynamics on this topic
- Identify any gaps in attitudinal data

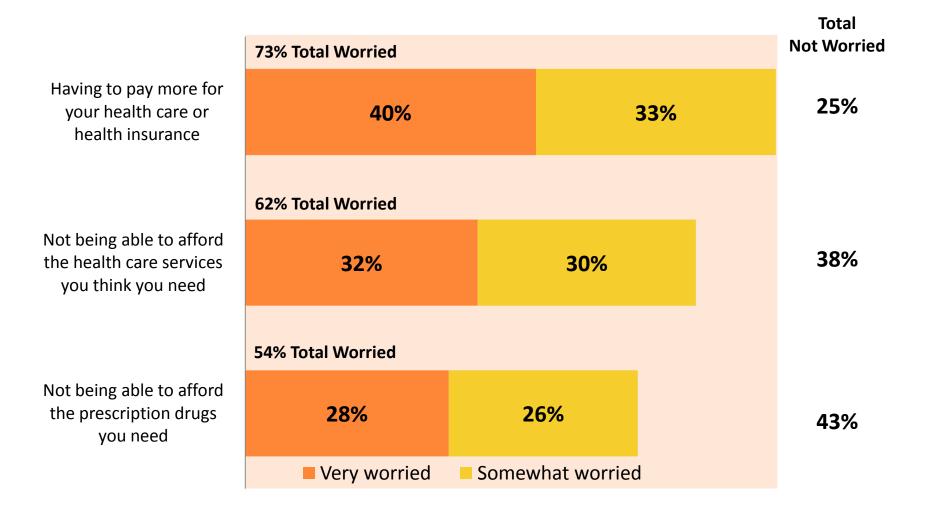
Attitudes toward Current Healthcare







Concerns about Healthcare



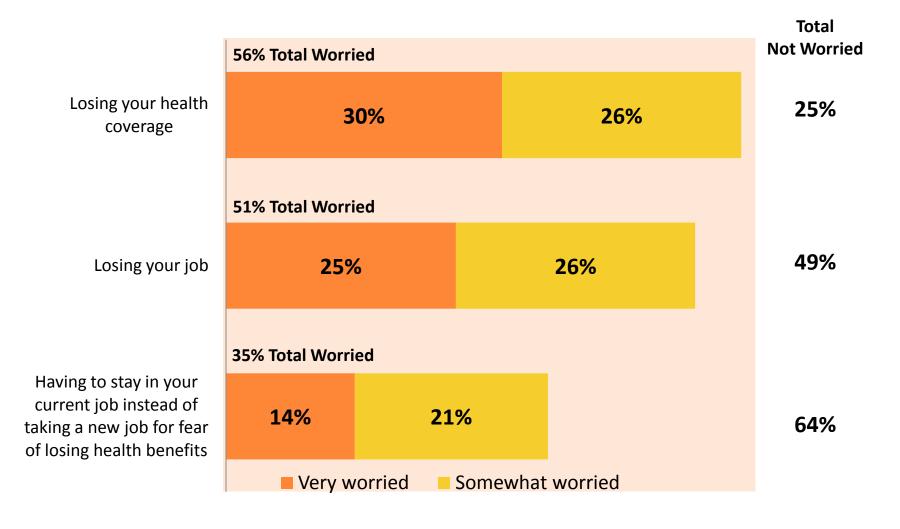
Source: Henry J. Kaiser Family Foundation, Kaiser Health Tracking Poll (2011); "How worried are you about (INSERT – READ AND RANDOMIZE)?"

Methodology: Designed and analyzed by public opinion researchers at the Kaiser Family Foundation led by Mollyann Brodie, Ph.D., including Liz Hamel, Sarah Cho, and Theresa Boston. September 7 – 12, 2011.

Sample: A nationally representative random sample of 1,201 U.S. adults were interviewed. 700 respondents were interviewed on a landline telephone, and 503 were interviewed on a cell phone, including 203 who had no landline telephone in English and Spanish by Princeton Survey Research Associates. Margin of error ± 3.



Concerns about Healthcare



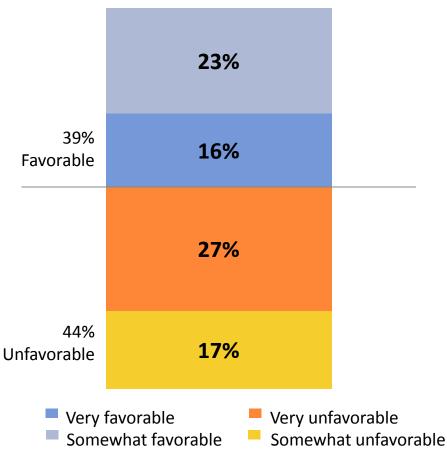
Source: Henry J. Kaiser Family Foundation, Kaiser Health Tracking Poll (2011); "How worried are you about (INSERT – READ AND RANDOMIZE)?"

Methodology: Designed and analyzed by public opinion researchers at the Kaiser Family Foundation led by Mollyann Brodie, Ph.D., including Liz Hamel, Sarah Cho, and Theresa Boston. September 7 – 12, 2011.

Sample: A nationally representative random sample of 1,201 U.S. adults were interviewed. 700 respondents were interviewed on a landline telephone, and 503 were interviewed on a cell phone, including 203 who had no landline telephone in English and Spanish by Princeton Survey Research Associates. Margin of error ± 3.

Attitudes Toward Healthcare Reform

Opinion of Health Reform Law



40% Say congress should let the law stand
30% Say congress should try to repeal the entire healthcare reform law
17% Say they should repeal certain parts of the law

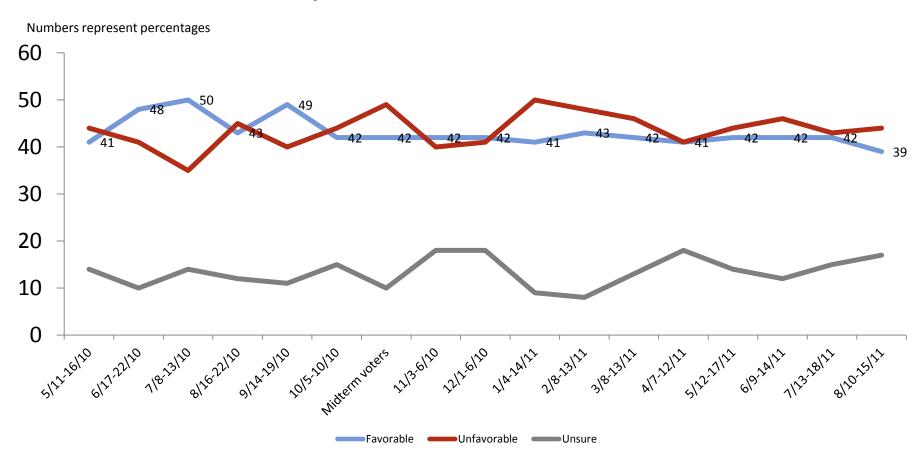
Source: Henry J. Kaiser Family Foundation, Kaiser Health Tracking Poll (2011); (L->R) "Given what you know about the health reform law, do you have a generally (favorable) or generally (unfavorable) opinion of it?," "What would you like to see Congress do when it comes to the health care law?"

Methodology: Designed and analyzed by public opinion researchers at the Kaiser Family Foundation led by Mollyann Brodie, Ph.D., including Liz Hamel, Sarah Cho, and Theresa Boston. August 10 – 15, 2011. Sample: A nationally representative random sample of 1,201 U.S. adults were interviewed. 700 respondents were interviewed on a landline telephone, and 503 were interviewed on a cell phone, including 203 who had no landline telephone in English and Spanish by Princeton Survey Research Associates. Margin of error ± 3.



Attitudes Toward Healthcare Reform

Opinion of Health Reform Law over time



Source: Henry J. Kaiser Family Foundation, Kaiser Health Tracking Poll (2011); "As you may know, a new health reform bill was signed into law earlier this year. Given what you know about the new health reform law, do you have a generally favorable or generally unfavorable opinion of it?"

Methodology: Designed and analyzed by public opinion researchers at the Kaiser Family Foundation led by Mollyann Brodie, Ph.D., including Liz Hamel, Sarah Cho, and Theresa Boston. August 10 – 15, 2011. Sample: A nationally representative random sample of 1,201 U.S. adults were interviewed. 700 respondents were interviewed on a landline telephone, and 503 were interviewed on a cell phone, including 203 who had no landline telephone in English and Spanish by Princeton Survey Research Associates. Margin of error 3.



Knowledge of Health Reform Law

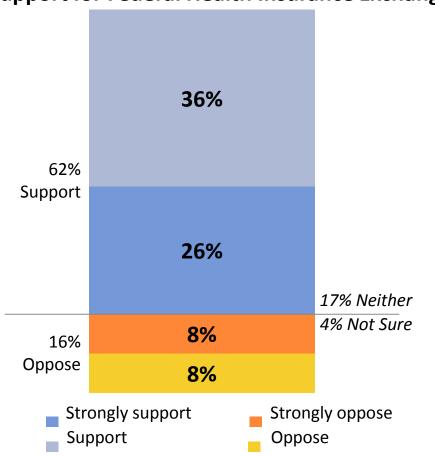
Knowledge of Elements of HeatIh Reform Law (All numbers shown are percentages)			
	Yes, the law will do this	No, the law will not do this	Unsure
(Asked in 9/2011)			
Prohibit insurance companies from denying coverage because of a person's medical history or health condition	61	30	9
Create an insurance option, or high-risk pool, for those people whose pre-existing health conditions currently make it difficult for them to find and buy affordable health insurance	56	30	14
Prohibit insurance companies from setting lifetime limits on the total amount they will spend on a person's health care	48	34	34
(Asked in 8/2011)			
Require nearly all Americans to have health insurance by 2014 or else pay a fine	65	25	10
Provide financial help to low and moderate income Americans who don't get insurance through their jobs to help them purchase coverage	58	32	10
Require insurance plans to offer a minimum package of health insurance benefits, to be defined by the federal government	57	25	18
Expand the existing Medicaid program to cover low-income, uninsured adults regardless of whether they have children	49	32	19
Eliminate co-pays and deductibles that people previously had to pay for many preventive services	29	52	20

Source: Henry J. Kaiser Family Foundation, Kaiser Health Tracking Poll (2011); "Please tell me whether you think it was included in the new health reform law, or not. First, to the best of your knowledge, would you say the new law does or does not (INSERT AND RANDOMIZE)? Would you say the law does or does not (INSERT NEXT ITEM)"

Methodology: Designed and analyzed by public opinion researchers at the Kaiser Family Foundation led by Mollyann Brodie, Ph.D., including Liz Hamel, Sarah Cho, and Theresa Boston. August 10 – 15, 2011. September 7 – 12, 2011. Sample: A nationally representative random sample of 1,201 U.S. adults were interviewed. 700 respondents were interviewed on a landline telephone, and 503 were interviewed on a cell phone, including 203 who had no landline telephone in English and Spanish by Princeton Survey Research Associates. Margin of error ± 3.

Attitudes Toward Health Insurance Exchanges

Support for Federal Health Insurance Exchange



Opinion of Role of States/ Federal Government Regarding Health Insurance Exchanges

42% Say the federal government should have more authority regarding health insurance exchanges

28% Say states should have more authority regarding health insurance exchanges

28% Say the Affordable Care Act got the balance about right

Source: Commonwealth Fund/Modern Health Care Opinion Leaders Survey (2011); "Please indicate the degree to which you support the creation of a federal health Insurance exchange in addition to operable state health insurance exchanges."

Methodology: Survey was conducted by Harris Interactive. May 2011. Sample: A broad group of 203 innovators and opinion leaders in health policy, health care delivery, and finance were surveyed. This was the 25th study in a series of surveys designed to highlight leaders' perspectives on the most timely health policy issues facing the nation. This survey focused on health reform and the role of states. Health care opinion leaders were identified by The Commonwealth Fund, Modern Healthcare, and Harris Interactive as individuals who are experts and influential decision makers within their respective industries.

Academic Research: Summary

- Current cost barriers and future concerns
- Challenges to health campaigns
- Elements of health campaign success
- Elements of marketing campaign success for health care exchanges
- Maryland health care quality compared to all states
- Impact of Affordable Care Act on small businesses
- Impact of health reform on individual states
- US Household health care costs
- High deductible health plans

Elements of Marketing Campaign Success

Developing an effective marketing strategy requires a clear understanding of the health reform law's goals and metrics of success, in order to ensure successful implementation.

- One example of this includes the Massachusetts Connector, that was charged with many responsibilities, including the development of a marketing plan to support the Exchange in their state.
- The Connector names these five elements as concrete lessons learned in promoting health care reform by implementing the marketing campaign.

Assemble a Team

Conduct Market Research

Partner with
Private & Public
Sponsors

Collaborate with Community Groups

Measure & Report on Success

- Assemble a team with expertise, capacity, and experience in conducting successful advertising campaigns
 - Establish an internal communication leader and team, responsible for public education and intergovernmental affairs
- Conduct market research to shape strategies and messages
 - Essential in defining the best advertising messages directed at various demographic groups – this includes one-on-one inperson interviews with Target Audiences
- Partner with private and public sponsors to increase market penetration with the goals of increasing health insurance enrollment
 - Professional sports teams, commercial businesses and nonprofit organizations, and state agencies grant unique visibility
- Collaborate with business, industry, and consumer groups to maintain broad support for health reform
 - In forming a Health Care Reform Coalition, members from these groups promote sound successes of the new law
- Measure and report on success and progress
 - Utilize data from various sources and state offices, track the Connector's website traffic, monitor public opinion of health care reform

ource: The Robert Wood Johnson Foundation, Health Reform Toolkit Series: Resources From the Massachusetts Experience

Task and Methodology

Empirical Data Scan

Research Data Scan Findings and Implications for Marketing

Marketing Implications

- Educating Maryland on the outputs of the Health Reform Law is imperative.
 - Nationwide, there is a lack of awareness and, a lack of support for the health reform law, and that is coupled with concern over the implementation of the law. We can not assume that sentiment in Maryland is counter to this. Messaging must educate residents on what this reform does for them, as consumers or employers, or what this does for their family, their children, their friends and acquaintances that are unemployed.
- Bring everyone along in educating on the Exchange.
 - While this will be most relevant to the target audiences, efforts should be made to educate and positively influence the whole state
 on this effort. The intent is to proactively create ambassadors within the population on the exchange, keep the Exchange top of mind
 for when someone does need it, and, become a point of pride for the State.
- Acknowledge the unique needs and attitudes of ideal target audiences for the Exchange
 - Within the larger population of Maryland residents, there are a potential 9 other ideal target audiences that could be consumers of
 the Exchange with varying backgrounds which can impact their needs. It is essential to conduct primary research to better understand
 these population dynamics, what they might need from the Exchange, and if/how the Exchange can be positioned to serve them.
- Messaging is not just about raising awareness that an Exchange exists, its about attaching value to what the Exchange offers.
 - Ideally, will not just provide access to health insurance. It will provide access to something that an individual really wants, needs, is grateful to have, or can find value in having. The latter is what will have the greatest impact on positive attitude toward the Exchange. In order to achieve this, the Exchange needs to reach individuals on a personal level, understand attitudes and pre-conceived notions and appear as a true solution.
- Anticipate potential sources of confusion with the Exchange in messaging
 - Primary research should be leveraged to help indicate where confusion could be greatest, and what messaging and treatments best mitigate that confusion.

Suggested Target Audiences

Massachusetts Research found the following segments to be important to reach when marketing the exchange, because:

- All were potential users of the Exchange
- All had something to gain through using the Connector
- Each had their own perspective and attitude toward insurance, and needed a message with which they could relate



Why target?

Audience	General Sentiment toward health insurance	m t
Entrepreneurs	 Don't like the idea of being forced to offer insurance Want to provide it, but its expensive Doubtful if it is affordable 	
Young Immortals	 Somewhat aware of being health insurance option Not sure insurance is needed Esp. when considering costs 	
The Overlooked, Strugglers, Strivers	 Wish had health insurance Health insurance is expensive Never been able to afford it before, can't afford it now 	

Leverage messaging to arrive at...

Desired Perspective

"I wasn't thrilled at first, but this has worked out. I couldn't afford to pay for my employees' health insurance before – but the Exchange is making private insurance affordable. I wish all government programs were this easy to figure out. I feel better knowing that I'm contributing to my employees' health."



"I never thought health insurance made sense for me, but now I'm required to get it, and its more affordable than ever. I like knowing that if I get hurt, I have the financial protection that health insurance provides."



"Coverage is now an option for me. It's affordable for the first time and the Exchange is making it easier for me to find the plan that is best for me."

^{*} Based off of Massachusetts learnings



Presence of Audiences

Audience Make-up	Presence in Maryland's Total Population
Entrepreneurs	
Small Business Owners	~1.8%*
Self-employed	4.8%
Young Immortals	
Persons age 24-35	13.2%
Males age 24-35	6.5%
Females age 24-35	6.8%
Single & never married, age 20-34	1.0%
Employed, age 20-24	4.1%
Employed, age 25-44	21.3%

Presence of Audiences

Audience Make-up	Presence in Maryland's Total Population
Strugglers	
Single Mothers	7.6%
Unemployed female householders with children under 6 years of age	<1%
Unemployed persons below the poverty level	1.8%
The Overlooked	
Persons over 50 years	31.9%
Males over 50 years	14.5%
Females over 50 years	17.3%
Persons age 65 and over under the poverty level	7.7%

Suggested Target Audiences

- Learnings from the Environmental Scan and Market Analysis, as well as general knowledge of the current economic climate suggest that additional groups are worthwhile to pursue as potential targets for the Exchange. These groups hinge around (as articulated in the key findings):
 - Maryland's small group insurance rates are the highest in the nation, and its these employers that may be making tough decisions surrounding how their insurance is sourced for their employees. Therefore, the Exchange matters for these employers as much as it does the employees.
 - The uninsured are not limited to those well below the poverty line, or an particular demographic. In fact, we see percentages of two parent households, percentages of households with higher incomes uninsured, and uninsured across all races. Therefore, we have to look at atypical uninsured demographics as well.
 - Changing factors in the job force have new graduates in a different predicament, being hourly, part-time, or temporary employees without insurance benefits.
 - Younger Americans, under 35 are often highly influenced by their parents, who remain an active part of their lives and decision-making. Thereby, parents are in a position to advise on health care coverage decisions.

Suggested Target Audiences

Employees of small to medium-sized employers (2-50, 51-100)

• Currently obtain insurance from employer, but employer may be tempted to opt out of providing insurance in place of a fee, thereby encouraging employees to use the exchange. These individuals used to see HC as an employee benefit. Now, the individual might approach the decision as a consumer.

Insurance lapsers

• Have been in and out of insurance plans throughout life as a result of changing jobs, gaps in employment. Have experienced health care/health care issues with and without insurance

Late-in-life laid off

 Experienced a lay-off in the past 5-6 years, have not yet regained same level of employee status (perhaps was bringing in a high salary, now, working in a different capacity for much less)

The Young-employed

• Under 25, out of college, off of parent's health insurance, terms of employment do not regularly cover employee benefits plans

Parents of children 18-35

 Potential opinion-influencer of key groups for Exchange, concerned over child's health, perhaps more than their child is, might be more aware of health care policy than child

Importance and Presence of Audiences

Audience Make-up	Presence In Maryland	Source
Employees of small to medium-sized companies		
Employed by companies with 1-99 employees	15%	2009 ACS Census
Employed by companies with 100-499 employees	2%	2009 ACS
Insurance Lapsers		
Families with only part-time or part-year adult workers, who are uninsured	35%	2011 Maryland Health Insurance Coverage Report
Late-in-Life Laid-Off (LLLO)	Between 24% and 29% of recent unemployment insurance claimants	2010-2011 BLS
Young-Employed		
Age 18-24	10%	2010 ACS Census
Age 18-24 who are also uninsured	2%	2010 ACS Census
Age 16-24 who are in the labor force and employed	6%	2010 ACS Census
Parents of Young Adults		
Parents of those age 18-34	23%	2010 ACS Census